FCC 388

DTV Consumer Education Quarterly Activity Report

Instructions

This form should be used to provide the Federal Communications Commission (FCC) with information pertaining to <u>all</u> station activity to educate consumers on the transition to digital television (DTV). All stations should log DTV Transition-Related Public Service Announcements (PSAs) and other DTV activities using the appropriate house (identification) numbers. These logs or records should include the date and time that each DTV activity occurred. This form must be filed in Docket Number 07-148 as Document Type: REPORT, and placed in the station's Public Inspection File. This form must continue to be filed for each quarter in which a station has DTV Transition education obligations.

- Go to the ECFS upload page: http://fjallfoss.fcc.gov/prod/ecfs/upload-v2.cgi
- Fill out the relevant cover sheet information.
- In the "Send Comment Files to FCC (Attachments)" section click the "Browse" button to choose the file you want to attach. (Or the first file if you have multiple files to attach)
- Click on the "Select one of these file types or convert your file to one of these types:" dropdown to choose the type of file that was attached.
- Click "Send Attached File to FCC"
- If you only had one file to attach click "Finish Transaction and Receive Confirmation".
- If you have another file to attach, click on the "Enter Additional Attachments"

Station Call Sign(s)		KLBY
Report reflects information for	quarter ending (mm/dd/yy)	03/31/08
Have you opted to comply with	Option One, Two, or Three (once elected, this ch	oice may not change)?
Option One (A and I	O) Deption Two (B and D)	Option Three (C and D)
Over the past quarter, have you	ı fully complied with the requirements of this opt	ion?
Simulcasting		
Are you simulcasting on your An	alog channel and your primary Digital stream?	
⊠ Yes □	No	
	If YES , complete only one form for both. I channel and a second for your primary Digi	, ,

Call Sign	Channel Numbers		Community of	License	
VI DV		City	State	County	Zip Code
KLBY	Analog 4 Digital 17	Colby	KS	Thomas	67701
Licensee Gray Tele	evision Group Inc.				
Above, circle the Channel	Number(s) to which this form applies.	Nielsen DMA	World	Wide Web Home Page	Address
KLBY TV Ch 4 and KL	BY DTV Ch 17	Wichita/Hute n-Plus	hinso http://v	www.kake.com	
Facility ID Number	Previous Call Sign (if applicable)	I	icense Renewal I	Expiration Date (mm/d	d/yy)
65523				12/31/13	

Section A (For broadcasters electing Option One)

Stations that elect Option One must place a copy of this form on the station's public website, if such exists.

On its analog channel, and its primary digital stream, a station must air one transition PSA, and run one transition crawl, in every quarter of every day. This requirement will increase to two PSAs and crawls per quarter per day on April 1, 2008, and to three of each on October 1, 2008. Stations are required to air PSAs or crawls at various times in any given day part, and at least one PSA and one crawl per day must be run during primetime hours. On-air education must not contain inaccurate or misleading statements and must be provided in the same language as a majority of the programming carried by the station. PSAs must be at least 15 seconds, and closed-captioned. Crawls must run during programming for no fewer than 60 consecutive seconds across the bottom or top of the viewing area (See rules for additional details).

Have you aired a sufficient number of eligible PSAs (28, 56, or 84 per week, depending on the reporting period) during the correct quarters of the day?
☐ Yes ☐ No
Have you aired a sufficient number of eligible crawls (28, 56, or 84 per week, depending on the reporting period) during the correct quarters of the day?
Yes No

Section B (For broadcasters electing Option Two)

On its analog channel, and its primary digital stream, a station must run an average of 16 transition-related PSAs and 16 transition-related crawls, snipes, and/or tickers per week in each quarter, all between the hours of 5 a.m. and 1 a.m.. It must also run one 30 minute DTV-related informational program once, and one 100-Day Countdown piece per day for the 100 days prior to the conclusion of the transition. Comment boxes MUST be used to describe these compliant activities (See rules for additional details).

Total Number of Eligible DTV Transition-Related PSAs and Crawls, Snipes, and/or Tickers (CSTs) Run -- Last Quarter

How many DTV PSAs and CSTs did your station run between 5:00	a.m. and 1:00 a.m. last quarter?
Total 5:00 a.m. to 1:00 a.m. PSAs	70
Total 5:00 a.m. to 1:00 a.m. CSTs	0
For informational purposes only, how many DTV PSAs and CS7 a.m.?	Ts did your station run in the last quarter from 6:00 a.m. to 9:00
Total 6:00 a.m. to 9:00 a.m. PSAs	23
Total 6:00 a.m. to 9:00 a.m. CSTs	0
For stations located in the Eastern or Pacific Time Zone, how many from 6:00 p.m. to 11:35 p.m. (must average at least 4 per week)?	DTV PSAs and CSTs did your station run in the last quarter
Total 6:00 p.m. to 11:35 p.m. PSAs	n/a
Total 6:00 p.m. to 11:35 p.m. CSTs	n/a
For stations located in the Central or Mountain Time Zone, how ma from 5:00 p.m. to 10:35 p.m.(must average at least 4 per week)?	any DTV PSAs and CSTs did your station run in the last quarter
Total 5:00 p.m. to 10:35 p.m. PSAs	17
Total 5:00 p.m. to 10:35 p.m. CSTs	0
Comments (add additional sheets where necessary):	

30 Minute Educational Programs – Last Quarter

How many 30 minute, DTV-related in be run between the hours of 8:00 a.m.			he quarter? At least one such program must
Total number of 30 Minute Informatio	nal Programs	0	
Comments (add additional sheets when	re necessary):		
100-Day Countdown Eligible Pieces	– Last Quarter		
activities. Stations must execute a m	inimum of one "Countdo	wn to DTV" on-air activity	e in special 100-Day "Countdown to DTV" y per day during the 100 days leading up to wn to DTV" pieces did your station run?
	Graphic Displays		
	Animated Graphics		
	Graphic and Audio Disp	plays	
	Longer Form Reminder.	S	
Comments (add additional sheets whe	re necessary):		
Requirement not in effect 1 st Quarter 2	* *		

Section C (For Noncommercial broadcasters only)

beginning November 1, 2008, it increases again, to 180 seconds per day and 22.5 minutes per month between 6 pm and midnight. It must also run one 30 minute transition education piece once (See rules for additional details).

Have you aired a sufficient amount of consumer education (60, 120, or 180 seconds per day, depending on the date) during each day this quarter?

Yes No

Minute Educational Programs – Last Quarter

How many 30 minute, DTV-related informational programs did your station run during the quarter? The comment box may be used to describe this activity. At least one such program must be run between the hours of 8:00 a.m. and 11:35 p.m., prior to February 17, 2009.

Total number of 30 Minute Informational Programs

Comments (add additional sheets where necessary):

On its analog channel, and its primary digital stream, a station must air 60 seconds per day of on-air consumer education, in variable timeslots, including at least 7.5 minutes per month between 6 pm and 12 am. Beginning May 1, 2008, this requirement doubles, and

Section D (For all broadcasters)

may be used to describe these initiatives.	
⊠ Yes □ No	Comments (add additional sheets where necessary): KAKE News produced a 45 sec report on the DTV change over that aired on 03/31/08 in our 4pm, 5pm, 6pm and 10pm newscasts.
Station Website Additional Activity Rela	ted to the DTV Transition – Last Quarter
Does your station have a Website?	Yes No
f YES, did your station provide additional lescribe what was posted on the station's W	DTV related information or activities on that Website? The comment box may be use Vebsite.
⊠ Yes □ No	Comments (add additional sheets where necessary): KAKE.com posted links to the FCC's offical web site for the DTV change over and educational information.
Check all of the DTV related activities liste	t Quarter ed below that your station engaged in over the last quarter. The comment box may be t
Check all of the DTV related activities liste	
Check all of the DTV related activities liste to describe this activity.	ed below that your station engaged in over the last quarter. The comment box may be u
Check all of the DTV related activities liste o describe this activity. Speaking Engagements	Ed below that your station engaged in over the last quarter. The comment box may be a Comments (add additional sheets where necessary):
☐ Speaking Engagements ☐ Community Events ☐ Other (describe)	Comments (add additional sheets where necessary): Comments (add additional sheets where necessary):

STATION CERTIFICATION

I certify that the statements in this document are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.

Typed or Printed Name of Person Signing	Typed or Printed Title of Person Signing
Patrick Myers	Director of Operations
Signature	Date
	04/09/08

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/CR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

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